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A TRACE TRACE		Application Number 10/688,982							
IRANSIVIIIIAL		Filing Date	October 21, 2003						
FORM		First Named Inventor	P. PUNIELLO						
(to be used for all correspondence after init	ial filing)	Art Unit	1732						
		Examiner Name	E. Lee						
Total Number of Pages in This Submission	14	Attorney Docket Number	20002.0286						
	ENCLO	SURES (check all that apply)							
Fee Transmittal Form (duplicate)			After Allowance Communication to Group						
Fee Attached	Licens	ing-related Papers	Appeal Communication to Board of Appeals and Interferences						
Amendment / Reply	Petition	n	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final		n to Convert to a ional Application	Proprietary Information						
Affidavits/declaration(s)		of Attorney, Revocation e of Correspondence Address	Status Letter						
Extension of Time Request (duplicate)	☐ Termin	aal Disclaimer	Other Enclosure(s) (please identify below):						
Express Abandonment Request		st for Refund umber of CD(s)							
Information Disclosure Statement	05,								
Certified Copy of Priority Document(s)	Rema	rks							
Response to Missing Parts/ Incomplete Application									
Response to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNA	TURE OF	APPLICANT, ATTORNEY, C	OR AGENT						
l or	Firm Stephanie D. Scruggs, Reg. No. 54,432								
Signature Stephania Surge									
Date March 6, 2006									
	CE	RTIFICATE OF MAILING							
I hereby certify that this correspondence Service with sufficient postage as first Alexandria, VA 22313-1450 on the date s	class mail ir	n an envelope addressed to: (or deposited with the United States Postal Commissioner for Patents, P.O. Box 1450,						
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete If Known								
			Application Number	10/688,98	2		O. 40				
FEE TRANSMITTAL			Filing Date	October 2	1, 2003	MAR 0 6 2006					
fo	r FY 2	2005		First Named Invento	or P. PUNIEI		12	<u> </u>			
Applicant claims s	mall entity st	atus. See 37	CFR 1.27	Examiner Name	E. Lee		13/	TATHADEMARTE			
				Art Unit	1732			TRADEM			
TOTAL AMOUNT OF	PAYMENT	(\$) 450		Attorney Docket No	. 20002.028	36		<i>_</i>			
METHOD OF PAYMENT (check all that apply)											
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):											
	Deposit Account Deposit Account Number: 19-5127 Deposit Account Name: Bingham McCutchen LLP										
For the above	e-identified de	posit account	, the Director is	hereby authorized	to: (check all	that apply)					
⊠ Charge	e fee(s) indica	ated below		□ c	harge fee(s) i	ndicated below	, except fo	r the filing fee			
			nderpayments o	f fee(s)	redit any over	rpayments					
Under WARNING: Information of	37 CFR 1.16		lic. Credit card in	formation should no	ot be included	on this form. Pr	ovide credit	card			
information and authoriza			0.0011 0010 11	Should It		1011111 (1					
FEE CALCULATION											
1. BASIC FILING, S				ADOU EFFO	EV	A BAIRI ATION	EEE0				
	FILING	FEES Small Ent		ARCH FEES Small Er		AMINATION Small					
Application Type	Fee (\$			e(\$) Fee(\$)		e(\$) <u>Fee</u>		ees Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	(0	(0					
2. EXCESS CLAIM	FEES						<u>Sn</u>	nall Entity			
Fee Description						<u>Fe</u>	e (\$)	Fee (\$)			
Each claim over 20						_	0	25			
Each independent claim over 30 (including Reissues)							00 :0	100 180			
Multiple dependent claims Total Claims Extra Claims Fee(\$)			Fee Paid (\$)			i0 ultiple De	pendent Claims				
-20 or l		X	<u>. 55(#)</u>	. 55 . 4.4 (4)			Fee (\$)	Fee Paid (\$)			
HP = highest number			ter than 20.								
Indep. Claims				Fee Paid (\$)		-					
3 or H		x	=								
HP = highest numbe	r of independer	_	r, if greater than 3	· ————							
3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
sheets or frac Total Sheet						thereof Fe	e (\$) Fe	e Paid (\$)			
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$ - 100 = / 50 = (round up to a whole number) x =											
4. OTHER FEE(S)											
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): Petition for 2-month Extension of Time							45	<u> </u>			
SUBMITTED BY											
Signature Stuplanu Stup Registration No. (Attorney/Agent) 54,432						Telephone (202) 424-7500					
Name (Print/Type)	Stephanie D. Scn	1ggs					Date	March 6, 2006			

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